COLLEGIATE WATER POLO ASSOCIATION

OFFICE/QUESTIONS: Email: office@collegiatewaterpolo.org / Phone: 610-277-6787

WHITE COPY TO LEAGUE OFFICE YELLOW COPY TO DARK TEAM PINK COPY TO WHITE TEAM

DARK TEAM_____ **LOCATION**_____ **WHITE TEAM**_____ **DATE**_____

CAP	NAME	STATS	SAVES/GOALS BY QUARTER 1ST	2ND	3RD	4TH	QT	TOTAL	P. FOULS		
1A											
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											

CAP	NAME	STATS	SAVES/GOALS BY QUARTER 1ST	2ND	3RD	4TH	QT	TOTAL	P. FOULS		
1A											
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											

E/MAM–EXCL. MINOR ACT MISCONDUCT, P/MAM–PENALTY MINOR ACT MISCONDUCT, G–GOAL, G-E–ADVANTAGE GOAL, E–EXCLUSION, P–PENALTY, MD–MISCONDUCT DISRESPECT, MV–MISCONDUCT VIOLENCE, FM–FLAGRANT MISCONDUCT, YC–YELLOW CARD, RC–RED CARD, YC/RC– YELLOW CARD/RED CARD, TO–TIMEOUT, 30TO–30 SEC. TIMEOUT

TIME	CAP#	TEAM	REMARKS	D-W

TIME	CAP#	TEAM	REMARKS	D-W

TIME	CAP#	TEAM	REMARKS	D-W

TIME	CAP#	TEAM	REMARKS	D-W

TIME	CAP#	TEAM	REMARKS	D-W

Results

QTR	DARK	WHITE
1		
2		
3		
4		
OT		
FINAL		

Sprint

QTR	DARK	WHITE
1		
2		
3		
4		
1ST OT		
2ND OT		

TIME OUTS

DARK				
WHITE				

30 TO

REF(s) SIGNATURE:_____

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